תייייייייייייייייייייייייייייייייייייי		
	,	

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Christine Patter	SOF Phone:
Owner (s) Mailing Address:	
Land Owner Name (s): Construction or Site Address: PIN # Parcel #	Phone: Springs Rul-
PIN # Parcel #	, , ,
Job Cost:Description of Work to be done	no work, reconnect
Mechanical: New Unit With Ductwork New Unit Witho	ut Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change * For Progress Energy customers we need the	Service Reconnect X Other
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Subdivision:	Lot#:
Subdivision.	E0(#.
(Contractors Name) will provide the	(Trade) labor on this structure.
am the building owner or my NC state license number is	, which entitles me to
perform such work on the above structure legally. All work si	nall comply with the State Building Code and all
other applicable State and local laws, ordinances and regulat	ions.
Contractor's Company Name	Telephone
Address	Email Address
License #	
Structure Owner / Contractor Signature: Christian	
By signing this application you affirm that you have obtained purchase permits on their behalf. If doing the work as owner you like listed property for 12 months after completion of the listed	ou understand that you cannot rent, lease or sell

*Company name, address, & phone must match information on license